	- 1			(Coju	(Column 2)		SMALL ENTITY			10/023245 OTHER THAN SMALL ENTITY				
	ŀ	BASIC FEE		HUMBER	FILEO			-1 -	SWALL EN	TITY .	OR	-210 S	other Mall e	THAN
		. (37 OFR C.CSC	# []			HUMBER EX	TRA	- 1:	RATE	FEE	1.	<u></u>	THE C	4111
	- 1	COLCER LIGHT	ē	20			:	11.			1	RA	TE .	· 60
	ŀ	INDEPELIABIL		30 minus 20 =					7 R 1		OR	1.	T.	
	L	(3) CFR 1.16(b	11	3	vinus J e .			1 X 14			OR.	× 4 5	7	
	1	MULTIPLEOFF	FUNELIT					]   K s ]	00.		·	-		
	r	MULTIPLE DEPENDENT CLAIMPRESENT . (37 OFR 1.16(d)) .							80		OR	x , 20	Q	- 1
. •	'	" (I the difference in column 1 istess than zero, ealer "O" in column 2.							QU.		ġR .	+36	0	
	1			· ro	TAL	. 1	00							
	1	CLAIMS AS AMENDED - PART (I								·	OR	TOTAL		- 1
	L		(Column		•									
	_	a Wall	CLAIN		(Colun		n JI	SI	MALLENTI		OR	051		1
	ŧ	PINISH	REMAIN	ING	HIGHE	R.   PRESEN	1117	1	7	1117	Ort	SMÁ	IER THA LL ENTI	N .
	ű	<u> </u>	AFTE	ENT	PREVIOU	ISLY FXTE	A	RATI	- 1 ~0:		-1		-	
۱ ا	AMENOMENT	(JI OFR 1.160	24	Mic	PAID FO	<del>R   = = =</del>		-	FION		- 1	RATE	- 110	)O-
•	Zi.	Independent (1) OFFI 1.166	1 2	.Min				x , 25			·	EK	F	
- 1	₹	Eggs nam		<u>l</u> _	3		- 1	x 5 100	7.	'		<u>.50                                    </u>		12
ŀ		THEST PRES	entation of Mu				°	RK	.200					
- 1								+s 180	<u>}.</u>	0	R te	36	1	
- [		•	(Cal):	•				ADD'E FEI	e	7 0	TO	TAI	<del> </del>	
: [	00		(Column 1)		· (Column	21 (Column 3	1	,	-		, AD(	DIFEE		
- [	닐	-	REMAINING	3	HIGHEST	PRESENT	71	A 172	7	<del>,</del>				-1
		Total	VMEHDMEN	T	PREVIOUSL PAID FOR	Y EXTRA	11	RATE	ADOI- TIONAL	1	l a	ME	ADD	1.
	Şŀ	th best 1.16(4)		. Minus	7	= .	1 }	28	FEE	1 7	L	- 1	THOMAL	. 1
	AMENOMENT	CHE LIGHT	1.	· Manus	1	<del></del>	7 1-	x . 25.		OR	KK	50.	FEE	
13	₹	FRST PRESEN	TATION OF WAY		<u> </u>		1 12	x <u>s 100</u> .		OR	× 12			-1.
			TATION OF MULTI	HE DEPEKO	11.	1518O=		7						
1				-				OTAL	<del> </del>	OR	14.30			.
1-			(Cokenn 1)		Column a sa		•	OO'L FEE	<u></u>	OR	ADDY.	REE		7
. ! ?			CLAIMS ' REMAINING	7	(Column 2) HIGHEST	(Calumn 3)	-	***		•			<del></del>	-
.   }	Ē.		AFTER	1	PREVIOUSLY	PRESENT EXTRA		RATE	A001-	7			<del></del> :	
Ž	Γ,	Total	AMEHOMENT	Minus	PAID FOR	<u> </u>			TIONAL	ļ	RAT		ADDI- TRONAL	
١ž	1	ndependent of trigbil			<u> </u>	-	×	,25	- 100			I	FRE	1
AMENDMENT	-			Minus	114	=		100		₽₽	x 2 20	<del>-</del>		1
-	I f	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (31 CER 1.16(4))								OR	x 5,20	Q	;.	7
l								180.		OR .	+ 360	5		1
	. "	the entry in co	dumn I is less tha	In the entar	la columa 2, wall N THIS SPACE 1		ΩA	TAL O'L FEE		OR .	TOTAL		<del></del> -	1
	· Ř	the Highest H	lumber Previoust Umber Previours	Paid For	la column z. unile N THIS SPACE & N THIS SPACE & Dial or ladepende	z lesz trisu 50 ei z .0. ju cólnuu 2	nler "20	,,, ,,,			ADDIL FE	E [.		1
This .	00lle	ction of locam	mber Previously	Pald For (T	NTHIS SPACE & Did or independe 1.16. The inform	less than J, ent	er "3",							
though though	FO 60	biocettl su s	application. Confi	by 37 CFA	Dist or independe	nation is require	d to ob	cain de relair	e appropriate	bak in col	umn 1.		i	

This collection of Information is required by 37 CFR 1.16. The information is required to obtain of retain a benefit by the public which is to file land by the USPTO to process? an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes bi complete application from to the USPTO. Time will vary depending upon the individual case, Any comments amount of time you require to complete this form and/or suggestions to relivening this borden, should be sent to the Chief Information Office. U.S. Department of Commerco, P.O. Box 1450, Newandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO KIHIS

If you need essistance in completing the form, cell 1-800-P TO-9199 and solect option 2